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TRICARE CHANGE #: C-11

CHAMPVA POLICY MANUAL

CHAPTER: 2 SECTION: 17.12

TITLE: COLD THERAPY DEVICES FOR HOME USE

AUTHORITY: 38 CFR 17.270(a) and 17.272(a)(56)

RELATED AUTHORITY: 32 CFR 199.2, 32 CFR 199.4(d)(3)(ii), (g)(1), (g)(64), and

199.5(d)(7)

I. EFFECTIVE DATE

April 19, 1983

II. DESCRIPTION

Cold therapy devices generally consist of a picnic-type chest cooler in which is placed a quantity of ice and water and into which is submerged a low voltage submersible pump an in-line thermometer and flow control value. Water is circulated by way of a plastic tube to a hollow rubber pad which is placed on the affect body part, and back to the water chest. The device is sold under various trade names such as: Aqua K® pad, polar care device, cryo-cuff or other similar designations.

III. POLICY

- A. Cold therapy devices are excluded from coverage as:
- 1. DME (Durable Medical Equipment) with deluxe, luxury, or immaterial features; and

2. comfort and convenience item.

B. Cold therapy devices are not primarily medical in nature even though they are used to control pain. Ice packs have been shown to serve the same purpose.

END OF POLICY